

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross reference)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Print G		10-12-01
O.J.P.E. CLASSIFIER		1/1	10/12/01
FORMALITY REVIEW	EO	705	11/09/01
RESPONSE FORMALITY REVIEW	ET	90616	11/30/01

INDEX OF CLAIMS

✓ _____ Rejected
= _____ Allowed
- (Through numerical) Canceled
+ _____ Restricted
N _____ Non-elected
I _____ Interference
A _____ Appeal
O _____ Objected

09/973,802

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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913
11-05-01
241
11-30-01